

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400040010-3

SERVICES OTHER THAN PERSONAL

Bu. Vou. No. 92

U. S. Cost Reimbursable

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 506

To

(Payee)

PAID BY

SAPC 2227

COPY 1 OF 3

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				2,133.79	✓

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Use continuation sheet(s) if necessary

Shipped from to Weight Government B/L No. Total 2,133.79 ✓

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

STATINTL

Date 10-7-55

Amount verified; correct for

(Signature or initials)

2,133 79

Contract No. A101 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

† Approved for \$ 2,133.79

STATINTL

By

SIGN  
ORIGINAL  
ONLY

Title Authorized Certifying Officer

Title

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

APPROVED:

STATINTL

STATINTL

Approving Officer

Paid by { Check No. dated 19 for \$ on Treasurer of the United States in favor of payee named above.  
Cash, \$ on 19 Payee (Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", as the case may be.  
† If the ability to certify is questioned, the certifying officer must sign and state the reasons why it is necessary; otherwise the approving officer will sign on the line below.


Per

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Public Voucher for Purchases and  
Services Other Than Personal

CONTINUATION SHEET

U. S. Cost Reimbursable Sheet No. 1 of Bureau Voucher No. 92  
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		<u>PAYROLL</u> <u>SYSTEM 4</u>  Direct Labor Costs properly chargeable to Contract A101 for the period 9/26/55 thru 10/2/55.  Week Ending 10/2/55  Overhead computed at interim rate of of  STATINTL				STATINTL  2,133.79✓	